

# Playtime...

So good for me.



1.) On a scale of 1-10, how comfortable do you feel discussing physical activity with participants at your clinic?

Not comfortable 1 2 3 4 5 6 7 8 9 10 very comfortable

2.) On a scale of 1-10, how confident are you that "Playtime" is the right message to promote family health and well-being and encourage physical activity for WIC participants?

Not confident 1 2 3 4 5 6 7 8 9 10 very confident

3.) What is the primary way you plan to use "Playtime" at your clinic?

(Please circle)

Mailings

Interactive Classes

Interactive displays

Individual appointments

Other \_\_\_\_\_

4.) What other ways do you plan to promote "Playtime"?

Mailings

YES / NO

Interactive classes

YES / NO

Interactive displays

YES / NO

Individual appointments

YES / NO

Outreach to other agencies

YES / NO

Who / what agency? \_\_\_\_\_

Other \_\_\_\_\_

5.) Do you feel you need anything more before implementing "Playtime"?

Materials? YES / NO

Staff trainings on physical activity related to wellness? YES / NO

Staff trainings on childhood overweight & obesity? YES / NO

Other additional needs? \_\_\_\_\_

Clinic name: \_\_\_\_\_ Date \_\_\_\_\_